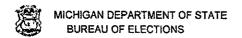
Authority granted under P.A. 388 of 1976

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

the treasurer (or designated record keeper) and candidate.	3. This Statement co	ivers From: 7 8 12 to	9/6/12		
1. Committee I.D. Number	4. Candidate Last I		e MI		
150059	MIZ				
2. Committee Name		cluding District # or Community Serv	·		
MICHAEL E. LUTZ	BAY C	ounty Commis	SSION THE DIST	-	
FOR COMMISSION.	4b. County of Reside		BAY		
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address				
1704 BORTON AVE	Susm	N Kiluz			
ESSEVULLE, MI, DOZZ		BORTON A	المستدار	1	
48/32	=		10,		
Area Code and Phone 989 3161296	C386	XVIUE, MI.	<i>4873</i> 2		
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone	(989) 233-03			
7. Treasurer's Business Address	Designated Record Designated Record I	rd keeper's Name and Mailing Addre	ss (If the committee has a	٦	
		······································	3 - a - a		
		5 %			
		· ·	N		
Area Code and Phone	Area Code and Phon		(2) 		
9. TYPE OF STATEMENT	Alea Code and Pilot	ile	District		
9a. Pre-Election OR 9b. Post	Election 90	Annual Statement (Coverage Year)		
9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c Pre-Election or Post-Election Statement relates to: or 9e to indicate which Statement is being amended)					
Primary General 9e. Dissolution of Candidate Committee			mittee		
Convention Sch	ol	Effective Date of D	issolution		
Special	us	checking this item, I/We certify that			
Date of Election, Convention or Caucus	où	itstanding debts, including late filing	fees. Further, I/We request that if		
B/7/17	. the	e dissolution cannot be granted, that e Reporting Waiver.		١	
		ote: The disposition of residual funds and the Summary Page.	must be reported on Schedule		
A committee that does not have a Reporting Waiver must file all re- Schedules. Direct contributions, in-kind contributions, loans, exper	wired Campaign State	ements. The Campaign Statements	must include all applicable	7	
if any of the information listed in items 2, 4, 5, 6, 7, or 8 has change amendment to the Statement of Organization should accompany to before the filling deadline of a required campaign statement, the	d since the information is Campaign Statemen at campaign stateme	nn was shown on the committee's Stant. If a request for a Reporting Wasent cannot be waived.	itement of Organization, an alver is not received on or		
Verification: IWe certify that all reasonable diligence was used in the property of the contents are true, accurate and contents are true.	the monaration of thi			-	
	myrritti.	PLY	0/.1		
Designated Record keeper SUSAN K. WTZ Type or Print Name	Signature Signature	Det Just Date	, 9/6/12		
••	Signature	10-21	9/6/12		
Candidate MICHAEZ B. WIZ	Jul	WE TO Date	9/6/12		
Type or Print Name	Cionatura	<i>y</i> v		1	



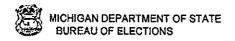
1. Committee I.D. Number

150059

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name MICHAGI E. LUTZ FOR COMMISSION

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7) \$	(22.)\$
EXPENDITURES		
8. Expenditures	_	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$,
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(100.)4	
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations	(12a)\$ 4991.83	
a. Owed by the Committee (Schedule 1E)	(12a.) \$ 4 (17.25	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ 38.51	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ O: OO	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ 38.51	į
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 3851.	•
familia to nominio tol		



DEBTS AND OBLIGATIONS ___1, Committee I.D. Number SCHEDULE 1E

9 0		3 km
CANDIDAT	F COM	MITTEE

CANDIDATE COMMITTEE 2. Co	ommittee Name MICHA	et ti lutz	tor Con	MOJEIM		
This Schedule itemizes:						
Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)						
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)		
Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$. 1. "		
MICHAEL E. LUTZ 1704 BORTON ALE ESSERVILLE, MI 48732	5. <u>Date Debt Was Incurred</u> : ZOOL 6. <u>Original Amount of Debt</u> : \$ 3079.01	\$ \$ \$	\$	\$ 3079.01		
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$			
Debt #2 Corp? Yes Owed to or by:	4. Type: COAN	``s				
MICHAEL E. WIZ 1704 BOKTON AVE	5. Date Debt Was Incurred:	\$		101707		
ESERVILLE, MI48732	6. Original Amount of Debt:	\$ \$! _{\$}	\$ 1912.82		
If bank loan, name of endorser or guarantor:			ount Endorsed: \$			
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$	Lindoised. 4			
,	5: Date Debt Was Incurred:	\$				
•	6. Original Amount of Debt:	\$ \$	\$	\$		
	\$	s		FORGIVEN		
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_			
		Page Subtotal	(Outstanding debt)	4991.83		
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)						
A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.						